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CONFIRMATION NO. 6493

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| <b>SERIAL NUMBER</b><br>10/747,607 | <b>FILING OR 371(c)<br/>DATE</b><br>12/29/2003<br><b>RULE</b> | <b>CLASS</b><br>709 | <b>GROUP ART UNIT</b><br>2151 | <b>ATTORNEY DOCKET<br/>NO.</b><br>FR920030014US1 |
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *None, VN*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

EUROPEAN PATENT OFFICE (EPO) 03368032.3 04/18/2003 *Yes, VN*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

04/09/2004

|  |                                       |                                |                              |                                    |
|--|---------------------------------------|--------------------------------|------------------------------|------------------------------------|
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no   | <b>STATE OR<br/>COUNTRY</b><br>FRANCE | <b>SHEETS<br/>DRAWING</b><br>2 | <b>TOTAL<br/>CLAIMS</b><br>4 | <b>INDEPENDENT<br/>CLAIMS</b><br>2 |
| 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                                       |                                |                              |                                    |
| Verified and Acknowledged <i>Vantguy</i><br>Examiner's Signature Initials  |                                       |                                |                              |                                    |

## ADDRESS

23550

## TITLE

Method and system for obtaining data through an IP transmission network by using an optimized domain name server

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|--|---|---|
| <b>FILING FEE<br/>RECEIVED</b><br>1030 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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